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PTO/SB/21 (6-98)

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

94

Application Number

09/322,666

Filing Date

May 28, 1999

First Named Inventor

William Fuglevand et al.

Group Art Unit

1745

Examiner Name

S. Kalafut

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JUN 11 2001  
JC 1700

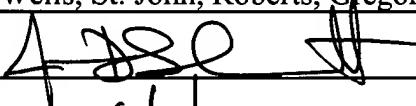
Attorney Docket Number

AV1-006

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> PTO Postcard Receipt
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Check for \$498.00
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

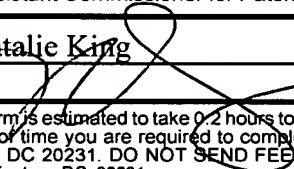
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James D. Shaurette, Reg. No. 39,833 Wells, St. John, Roberts, Gregory & Matkin, P.S.	
Signature		
Date	6/4/01	

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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

**TOTAL AMOUNT OF PAYMENT (\$)** 498.00

## Complete if Known

Application Number	09/322,666
Filing Date	May 28, 1999
First Named Inventor	William Fuglevand et al.
Examiner Name	S. Kalafut
Group / Art Unit	1745
Attorney Docket No.	AV1-006

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TC 1700

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)																																																																																																																																																														
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <b>23-0925</b></p> <p>Deposit Account Name Wells, St. John, Roberts, Gregory &amp; Matkin</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p>				<p><b>3. ADDITIONAL FEES</b></p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath 0.00</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet 0.00</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification 0.00</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination 0.00</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action 0.00</td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action 0.00</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month 0.00</td></tr> <tr><td>116</td><td>380</td><td>216</td><td>190</td><td>Extension for reply within second month 0.00</td></tr> <tr><td>117</td><td>870</td><td>217</td><td>435</td><td>Extension for reply within third month 0.00</td></tr> <tr><td>118</td><td>1,360</td><td>218</td><td>680</td><td>Extension for reply within fourth month 0.00</td></tr> <tr><td>128</td><td>1,850</td><td>228</td><td>925</td><td>Extension for reply within fifth month 0.00</td></tr> <tr><td>119</td><td>300</td><td>219</td><td>150</td><td>Notice of Appeal 0.00</td></tr> <tr><td>120</td><td>300</td><td>220</td><td>150</td><td>Filing a brief in support of an appeal 0.00</td></tr> <tr><td>121</td><td>260</td><td>221</td><td>130</td><td>Request for oral hearing 0.00</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding 0.00</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	James D. Shaurette	Registration No. (Attorney/Agent)	39,833	Telephone 509-624-4276
Signature		Date	6/4/01	

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